

BOOKING FORM

BOOKING FORM Maxima Travel BC Reg. #29133

TRAVEL DATE: 5/16/2017 - 5/31/2017 JOURNEY TO WELLNESS

For Reservations contact Svetlana Senyuk 604-454-9944 svetlana@naturalhealthresorts.com
Maxima Travel, 7581 Market Crossing, Burnaby, BC, V5J 0A3

First deposit of \$250 per person due upon reservation. Reservations are made on a first come, first served basis. Deposits are due December 16, 2016 after such time spaces are based upon availability. Final payment due by February 25, 2017.

YOUR INFORMATION:

Clearly print your full name (first/middle/last) as it appears on your government issued travel documentation.

First: _____ Middle: _____ Last: _____ : Suffix: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone: _____ Cell: _____

Email: Nickname: _____

Gender: () Male () Female Date of Birth: (dd/mm/yy) _____

Passport Number: _____ Expiration Date: _____ Date of Issuance: _____

City, Province, Country of Issuance: _____ Citizenship: _____

Emergency Contact: _____ Phone: _____

BRONZE PACKAGE _____ GOLD PACKAGE _____

ROOMING WITH:

First: _____ Middle: _____ Last: _____ Suffix: _____

Single () Looking for Roommate ()

AIR GATEWAY:

Departure airport for this tour: **Flight Itinerary from Vancouver:**

Air Seat Request: () Aisle () Window () Next To Travelling Companion

Maxima Travel cannot guarantee your seat preference.

Flight Itinerary Details

Flights	From	To	Departure	Arrival
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LH - 477	Vancouver,BC,CA	Munich,DE	May 16 06:35 PM	May 17 01:40 PM
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LH - 1691	Prague,CZ	Munich,DE	May 31 01:25 PM	May 31 02:20 PM
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Operated by Lufthansa Cityline

LH - 476	Munich,DE	Vancouver,BC,CA	May 31 03:30 PM	May 31 05:05 PM
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AIR UPGRADE: I am interested in purchasing an air upgrade to business or first class () Yes () No

Are you willing to separate from the group air schedule to accommodate your upgrade request? () Yes () No

PLEASE MAKE CHEQUES PAYABLE TO: Maxima Travel () Cheque () Credit Card

Deposit Amount: \$ _____ Total amount enclosed: \$ _____

Cardholder Name: _____

Cardholder Address: _____

Cardholder Phone: _____ Expiration Date: _____

Credit Card Number : _____ Amount charged: \$ _____

Important Conditions: Your price is subject to increase prior to the time you make full payment. Your price is not subject to increase after you make full payment, except for charges resulting from increases in government-imposed taxes or fees.

SIGNATURE REQUIRED for acceptance of the above conditions and agreement to credit card use:

Date: _____

I understand and accept Maxima Travel's cancellation policy, terms and conditions. If paying by credit card, I agree to pay according to the card issuer agreement

You were referred to Maxima Travel by _____